MEDICAL MISSIONARY

NOV.—DECEMBER, 1953

Good Samaritan

THE
MEDICAL MISSIONARY

Published by the
MEDICAL MISSION SISTERS
Society of Catholic Medical Missionaries, Inc.
8400 Pine Road, Philadelphia 11, Pa.

Sr. M. Angelica, Editor; Sr. M. Celeste, Business Mgr.; Sr. M. Sarah, Art Editor

VOL. XXVII November - December 1953 NO. 6

Contents

102 NEW VENTURE IN INDIA ..... Sr. M. Richard, S. C. M. M.

104 BUILDING THE HOSPITAL ..... Sr. M. Joanna, S. C. M. M.

105 INDIA FIGHTS MALARIA ..... Sr. M. Leonie, M. D.

107 FRIENDS FOR LIFE ..... Sr. M. Christopher, S. C. M. M.

110 CHRISTMAS ANGELS IN PAKISTAN ..... Sr. M. Bernadette, S. C. M. M.

111 GOOD SAMARITANS ..... Sr. M. Karen, R. N.

112 ADVENT PICTURE STORY ..... Sr. M. Janet, S. C. M. M.

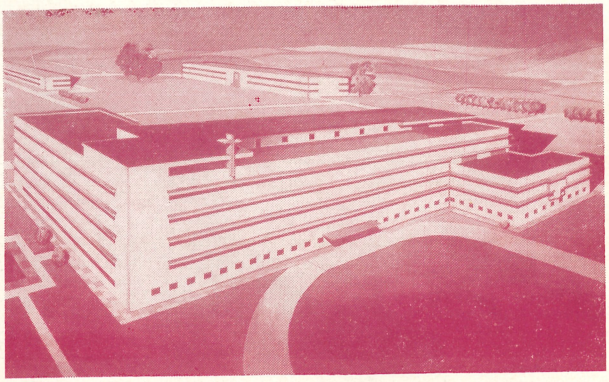
115 BOOK REVIEW ..... Sr. M. Clare, B. S. N.

117 MEDICAL MISSION CHITS

122 WHAT'S NEW IN THE MEDICAL MISSION WORLD Sr. M. Daniel, S.C.M.M.

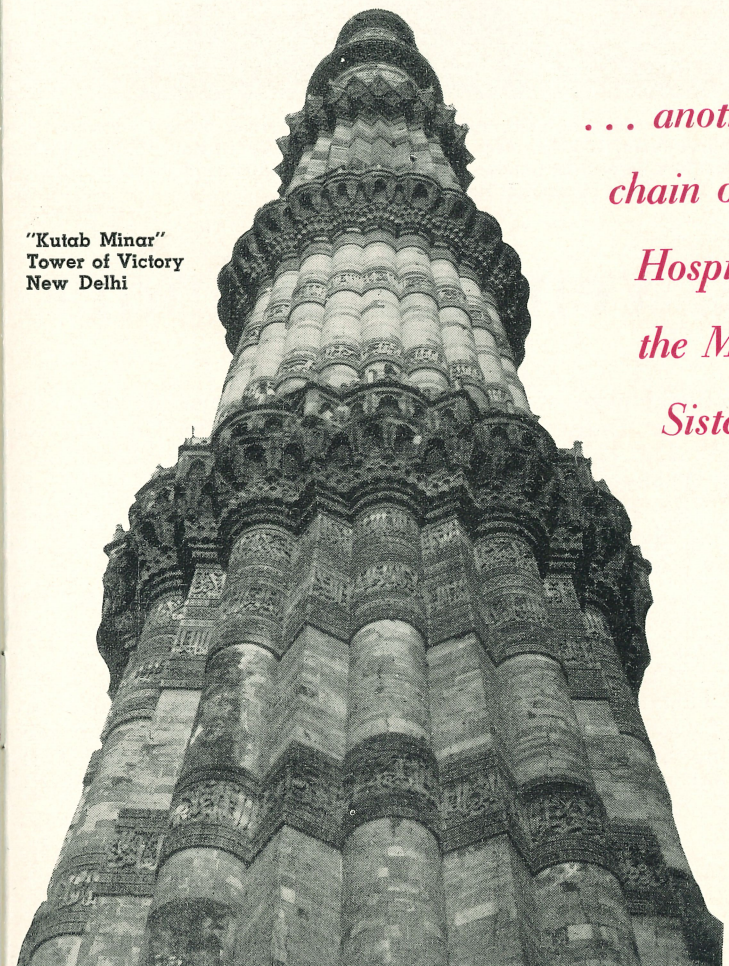
123 LITTLE EGGNOG ..... Sr. M. Raphael, B. S. Pharm

The Medical Missionary is published bi-monthly with ecclesiastical approbation by the Society of Catholic Medical Missionaries, Subscriptions $1.50 per year; 3 years $4.00; 5 years $6.00; foreign $1.75 per yr.; 4 yrs. $6.00. Entered as 2nd class matter Sept. 11, 1928 at the Post Office of Phila., Pa. under the Act of March 3, 1879.



Architect's plan
Holy Family Hospital
New Delhi, India

HOLY FAMILY HOSPITAL NEW DELHI, INDIA



"Kutab Minar"
Tower of Victory
New Delhi

. . . another link in the chain of Holy Family Hospitals that binds the Medical Mission Sisters in the daily joyful service of the sick . . . in seven countries.

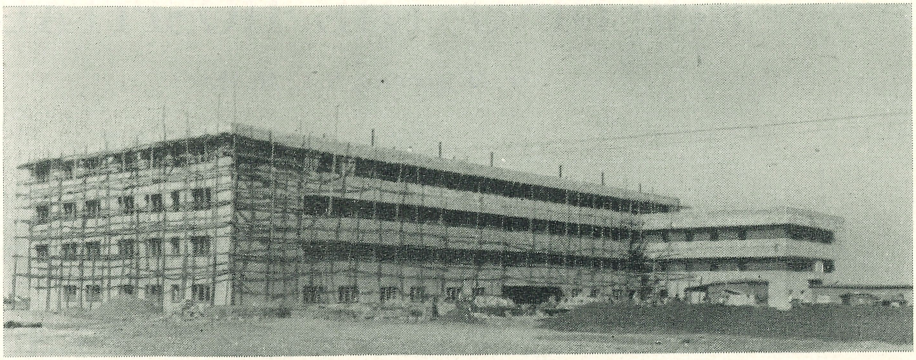
Dr. S. Radhakrishnan, Vice-President of India, speaking at the Dedication Stone Ceremony, Hol Family Hospital, New Delhi, India. L. to R. Msgr. Gordon; Rajkumari Amrit Kaur, India's Ministe of Health; His Grace, Most Rev. Joseph Fernandes, Archbishop of Delhi-Simla; Mother Anna Dengel M. D.; Dr. Sushila Nayar, Delhi State Minister of Health.

New Venture in India

THE FIRST official page of the history of the New Delhi Holy Family Hospital was opened on the feast of St. Therese, October 3rd, when the Vice President of India presided at the Dedication Stone ceremony. More than a thousand persons watched His Grace, the most Rev. Joseph Fernandes, Archbishop of Delhi-Simla bless the stone which bears the inscription: "Dedicated to the greater glory of God and to the cause of suffering humanity."

Mother Dengel traveled from America to be present when the latest Holy Family Hospital was introduced to the public. Mother welcomed the people, pledged future service to their sick and asked for their support to complete the building.

India's Health Minister, Rajkumari Amrit Kaur addressed the visitors and spoke of the need for hospitals in Delhi. There is only one hospital bed available for every thousand persons in the area. The Health Minister told of the India Government's interest in the



Holy Family Hospital, Delhi. Five stories have been completed but another must be built.

hospital and said that the most remarkable thing about the institution was that it would be a model of selfless service. She assured those present that the Medical Mission Sisters would serve the sick without thought of personal gain. Delhi State Health Minister, Dr. Sushila Nayar, congratulated the Sisters on the rapid progress that had been made on the building and pledged the State government's support for the project. Sardar Balwant Singh Puri, Secretary General of the Indian Red Cross Society called for public support of the hospital designed to care for all without distinction.

The laying of the Dedication Stone and the address by the Vice-President of India, Dr. S. Radhakrishnan, was the climax of the ceremony. Using a small silver trowel, Dr. Radhakrishnan cemented the engraved stone on to the front side of the building. Those present watched the proceedings with interest. It was not the great day of the hospital's opening but it was a definite step towards it. The ceremony was a pledge of future dedicated service and loving care of the sick in a land where such things are not assumed.

Dr. Radhakrishnan delivered a stirring address in which he exhorted the people to return to the ancient Indian tradition of solicitude for the worldly agonies of man. The Vice President said that though religion spoke through many dialects, its one authentic voice was compassion for humanity. The distinguished speaker remarked that he hoped that the example of the Medical Mission Sisters who had dedicated themselves to the selfless service of suffering humanity would serve to remind the people of the real nature of religion. He predicted that the Sisters of Holy Family Hospital, New Delhi, would receive the affection and gratitude of the people since few things forge so strong a bond of kinship between men as sorrow and suffering sympathized and shared. Dr. Radhakrishnan expressed his great happiness over the new hospital's proposal to train nurses. In conclusion the Vice-President thanked the Medical Mission Sisters on behalf of the people and the Government of India for establishing the new institution and for their years of service to the sick of India.

Sr. M. Richard, S. C. M. M.

BUILDING THE HOSPITAL

Sr. M. Joanna, S. C. M. M.

JUST ABOUT five miles from India Gate, which leads to the magnificent buildings of India's Independent Government, our New Delhi Holy Family Hospital is now under construction. Since the laying of its foundation last summer, the Hospital has made great strides toward reaching the planned-for six-story building. When completed, with its capacity for 280 beds, it will stand as one of the largest Catholic hospitals in India.

Most of the workmanship on the hospital is done by hand, no small tribute to the ingenuity and endurance of the Indian workers. The material, or most of it, is manufactured (in the real sense of the word) on the compound. The women coolies shape into moulds the hollow cement blocks. After shaping, the blocks are dried in the sun, then soaked in a pond of pumped water, from whence they are carried to the structure. Once they are fixed with mortar, they have to be watered by the *bhisti wallahs* (water-carriers) in order to cure the cement blocks.

Guess who carries the bricks and the mortar up to each story, from one hand to another? The women! You would be fascinated with the 40-lb. brickloads they carry on their heads. Their bright skirts, short blouses and curly shoes make such attractive dashes of red, black, and yellow against the gray walls. The men are kept busy fixing the bamboo poles for scaffolding, mixing mortar, or doing masonry, carpentry, sanitation, or steel reinforcement work.

In full swing, the compound is a beehive of activity—a combination of technical work with domestic life. For a while we had nearly 300 laborers working and living in our midst. A village of brick-huts mushroomed overnight. Babies were born beside the hospital walls. Many a time the Sisters went into the huts and saved babies' lives — babies desperately ill from pneumonia, acute dysentery, and even extreme rickets.

Holy Family Hospital in New Delhi is still under construction. Five stories of the building have been completed but an additional floor must be constructed, interior work finished and equipment provided before the hospital is ready to receive patients. Funds to complete the hospital are being solicited. It will be the first Catholic hospital in the Capital city.

Carrying empty pans back for another load.

INDIA FIGHTS *MALARIA*

Sr. M. Leonie, M. D., Sister-surgeon, Holy Family Hospital, Patna, India. For the past 12 years Sister M. Leonie, M. D. has devoted her skill to the care of the sick poor in India.

Sr. M. Leonie, M. D.

This day relenting, God hath placed within my hand
A wondrous thing, and God be praised!
At His command, seeking His secret deeds with tears and toiling breath,
I find thy cunning seeds, O million murdering death!
I know this little thing a myriad men will save.
O death, where is thy sting! Thy victory, a grave!
Before Thy feet I fall, Lord, Who made high my fate,
For in the mighty small is shown, the mighty great.

SO SANG Ross when he could prove positively that malaria, caused by the malaria parasite, was transmitted by the malaria mosquito. He was right in singing, and in the things about which he sang: "million murdering death." There is no better way of describing the ravages caused by malaria. Widespread epidemics occur in India and Pakistan, sending hundreds, thousands, sometimes even millions, to a premature grave. These are the actual deaths due to malaria. The economic loss, due to frequent attacks of malaria and the consequent persistent chronic ill health, is incalculable. How often in taking case histories, do we not get the answer: "Fever . . . yes, but it was only mamuli (ordinary) fever." One may be pretty sure that in a high percentage of cases, this is malaria fever or mausmi bukhar (seasonal fever), as it is commonly called.

Malaria is caused by the malaria parasite and transmitted, from man to man, by the bite of a mosquito. So far as is known, it exists only in man and mosquito. A simple statement, but what work, what research, with painstaking experiments lasting hundreds of years, was necessary before this fact became a certainty. Long ago, when malaria was scourging Rome, it was known that, in order to avoid

the evil, one should not live near the swamps. Its very name is derived from this idea: mal—bad; aria—air. It was thought that the malodorous air from the marshes caused fever. Now we know that mosquitoes breed in stagnant waters, which explains the occurrence of malaria in swamp-surrounded Rome. With the advent of the microscope and increasing research, the parasite was found in the red blood cells. Finally, it was established that the Anopheles mosquito transmits the parasite from man to man. When a mosquito bites an infected person, the parasites are sucked up with the blood of the victim. They undergo a cycle of developments in the body of the mosquito and soon numerous new parasites are ready to be deposited in the blood of any new victim, who is so careless as to permit himself to be bitten. Obviously the thing to do is to keep man and mosquito apart.

We find a most brilliant application of those newly-found scientific truths in the building of the Panama Canal under Gorgas. At first there were as many as 60-70 deaths per month among the workers. Later on, the incident rose to 176 per thousand, making the digging of the canal practically impossible. Rigorous measures were taken, tons of oil were poured on the swamps, which could not be drained economically, houses were screened, and so the canal was finished eventually.

Today in India and Pakistan, anti-malaria campaigns have been organized to help in draining swamps and spraying places where the mosquito might possibly breed.

It is amazing what has been accomplished in selected places. In 1950 the people of the Himalayan Terai began to take up arms against their ancient enemy. At the request of the Indian Government, WHO sent medical teams — the government brought in the necessary labor. UNICEF sent transportation, equipment and materials. With spray pumps and DDT, a commando operation against the mosquitoes was launched — house to house, wall by wall—on Gadarpur and every village in the Terai.

Swiftly the results began to be felt. In 1950, 77 children out of 100 were malaria victims. In 1951, only 3 children out of every 100 in the Terai had malaria. Today, in this, an area of 1,750 square miles, the scourge of malaria is under man's control.

India's millions can now hope for deliverance from their Public Enemy No. One, but to make their hope a reality, besides more technical experts and DDT, more education and cooperation on their part are urgently needed.

Mothers and children learn to guard against the mosquito. (W. H. O. Photo)

Sr.
bui

Sr. M. Pierre, R. R. L. (Fond-du-lac, Wis.) with Nur Jahan, Holy Family Hospital, Rawalpindi.

FRIENDS FOR LIFE

Sr. M. Christopher, S. C. M. M.

SHORTLY after my arrival in Pindi two years ago, a little girl of about 11 years was brought to the hospital suffering from tuberculosis of the forearm. Her mother had just died of tuberculosis and the father was left alone with five children—Nur Jahan was the oldest, the other four were boys. Despite her own poor health, she had nursed her mother through her illness. Perhaps this was why Nur Jahan was not just a little girl — she was almost a woman, a mixture of childhood and maturity.

Surgery was done in two stages and Nur Jahan had her arm in a plaster cast for several months. Although her hospitalization was over a long period of time, for the most part she was not a bed-case, and so she spent much of her time following the Sisters and nurses around the hospital, helping out in a sort of "Good deed Dottie" way. Her two outstanding qualities were her lovely smile that lit up her whole face—and her ability to talk her way out of, or into, anything that she happened to have her heart set on.

Once the arm was better, she was given her final discharge. By that time she had endeared herself to the Sisters and staff, and considered herself part of the family. With many "salaams" and thanks, she and her father took their departure.

Two weeks ago, just as I was closing the office in the evening, a small boy came running into the hospital—up to the desk, and excitedly informed me in URDU, that he had a patient out in front of the hospital in a "ghari." In MY Urdu, *ghari* meant a kind of horse-drawn carriage. Therefore I followed him

Sr. M. Christopher (Baltimore, Md.) with one of her many "friends for life," Holy Family Hospital, Rawalpindi, Pakistan.

to the door, fully expecting to see a woman or man in a tonga. You can imagine my surprise to find a young girl in an old baby carriage—the carriage had been padded with cotton wool and covered with a heavy blanket. Since there was no top to the carriage, they had tied a large, black umbrella to the head and opened it over her to keep off the sun.

It was hard to believe that this was the same Nur Jahan, who had left us so well and active two years ago. Now she was nothing but skin and bones — her legs were contracted and her feet were swollen —she was a most pitiful sight. However, as soon as she saw me her face lit up into a big smile, the same lovely smile, and I soon found out that her second quality also remained. She wanted to be admitted, and she started immediately to give me her "sales talk." It seems that she had been sick for some time and had been begging her father to bring her back to "her" Sisters at Holy Family. She realized how bad her condition was and told me that we did not have to give her any treatment —medicine or injections—just let her be here. Her father reminded me that he had little money to pay for her, so I told him that we would not expect him to do anything but arrange for her food. Although I realized that she was beyond medical help, and that we could do little for her, my heart ruled my head, and calling Sr. William to help me, we lifted her, carriage and all, up the front steps and wheeled her into the emergency room.

She realized that her first victory had been won. As soon as she was inside the door she said: "Now please give me a bath. I did not let the boys take care of me." So we got some warm water and began to give her her bath when we discovered several draining abscesses on her back. No wonder she groaned with pain when we lifted her from the carriage. As Sister prepared to dress the abscesses (and her father and brothers were safely out of ear-shot), she said: "Sister, don't let them bring me food—it is not so good. My little brother (about 9 years old) is the cook and he does not know *too* much about cooking." Needless to say, she had hospital food. The brothers and father came faithfully each day to visit her and always "salaamed" me on their way up the stairs.

Nur Jahan grew weaker day by day. Her father wanted her "treated" with streptomycin and Sr. M. Elise, M.D., ordered the injections, but Nur Jahan refused treatment. She said her father could not afford the injections and even if we would give them free, there was no use anyway. She refused in a mature way, not like a spoiled stubborn child might do — simply and calmly stating her side of it, and somehow we all respected her wisdom. Nur Jahan never said outright that she knew she was go-

ing to die, yet we all knew she knew it, and that she was not afraid of death.

This morning her father was waiting for me as I came to the office after Mass and breakfast. He wanted to take her home. I tried to reason with him—that she was still very sick, etc. But it was no use. I could see that his one desire was to have her at home for her last days. He, too, now saw that even "her" Sisters and Holy Family Hospital were not able to stay the ravages of the disease. We went up with the stretcher to bring her down. They had the same "carriage" to take her home. I begged them to get a tonga and offered to pay whatever cost might be incurred. However, they would not hear of it. In fact, I had the entire staff against me, as everyone assured me that in a tonga she would have much jumping and jarring, while in the carriage they could go slowly and avoid all the bumps and therefore her ride would be less painful. Finally I admitted that they were right and we lifted her from the stretcher to the carriage.

As she was leaving I told her that after a few days we would come to her home and see how she was getting on. We would change her dressings and bring her some medicines. This was just what she needed—you could almost feel her spirits lifting again—her smile returned, and she praised, blessed and thanked all the Sisters and nurses, as her brother raised the umbrella and started to wheel her home.

P.S. Two days later . . . Nur Jahan's father came to the hospital today. He said that she is not at all happy at home and says she does not mind dying but "please let me die at Holy Family Hospital." It is "her" Holy Family Hospital and she is "our" Nur Jahan —and we want her to join the Holy Family patients in heaven so she can be truly "ours" forever. . . .

Subscription
1 Yr. — $1.50
3 Yrs. — $4.00
5 Yrs. — $6.00

MEDICAL MISSIONGRAM

Travel Around The World With Us

From: THE MEDICAL MISSIONARY - 8400 Pine Road - Phila. 11, Pa.

M M M 1253 Philadelphia 11, Pa.

Dear Friendly Subscriber

Christmas List Completed? . . . Stop . . . For Nurse, Teacher, Student . . . Stop . . . Why not Magazine Gift Subscription . . . Stop . . . Read the Medical Missionary . . . Don't Stop!

The Editor

Send the MEDICAL MISSIONARY (Please Print)

To: Name .....
Address .....

Name .....
Address .....

Gift Card to read: from .....

( ) 1 yr. ( ) 3 yrs. ( ) 5 yrs.

CHRISTMAS ANGELS IN PAKISTAN

Sr. M. Bernadette, S. C. M. M.

IT IS usually Eastertime when I get the old Christmas cards from the U. S. A., but you have no idea what joy they cause when I go out to the refugee camps and give those shiny, lovely cards to the people.

The little children shout around me, "Taswir chahije." ("We want pictures.") They call them "American Photo Cards". Of course, in one camp there are about 5000 children, so you can imagine how many cards one needs, so that at least one child can have more than one or two.

Recently as we were walking in Mansar Camp giving out medicines, old clothing, dried milk, and Christmas cards, we were called by a venerable old man who was the "mulvi" (priest of the mosque) in the camp. He asked us to go and visit his sick wife. At the entrance of the mud hut there was a nice hookah (Indian pipe). Of course hookahs in Pakistan are very common — but what did he have on his hookah! Two little Christmas angels pasted on the hookah, and right away I thought, "where did he get those angels?"

After finishing our visit with his wife I asked the old "Santa Claus" where he got the angels. He said, "Sister-ji, don't you remember? You were giving out those nice cards last summer, so I cut them out and put them on my hookah! Aren't they nice?" And with a smile, smoked into his hookah. I think the angels must enjoy it too! And looking back from the distance, my head was full of thoughts about the Christmas angels.

By the time we left the camp there was a little group around the mulvi's hookah, because really the only recreation some of those poor people have is when they sit in a circle around the hookah and talk and smoke. Those poor refugees have very little joy or comfort. No doubt God will give them a very high place in heaven.

In the other camp, I found a little boy about four years old, and he was holding onto his Christmas cards, too. His torn little pockets contained about six cards and

one little Hummel angel was smiling down on him—while he was dying with fever. The mother of the child said his Christmas cards were his "real treasures," and the finger prints here and there were very black on the picture, but the little angel was still smiling on "Ajub."

Now and again I find their little mud houses all decorated with pictures, with Christmas cards.

How I would love to take some of these poor children, and even the old folks, back to our homes—and let them see the lovely decorated trees and the gifts around. I just wonder what they would think or say. But it is a great joy to see those tiny hands and big brown eyes, when they are begging for their Christmas cards. They make them so happy, help to radiate joy in the refugee camps—so we shall wait for your Christmas angels in Pakistan.

GOOD SAMARITANS

THE OTHER afternoon when Srs. Kathleen, Christopher and I were in Murree (a hill station 39 miles north of Rawalpindi), we noticed a little boy about nine years of age lying alongside the road ahead of us. This isn't too unusual at this time of the day, as many people lie down and take a little nap along the road. However, when we got nearer we noticed that he was breathing very rapidly and that flies were playing havoc with him. We soon discovered that the child was burning up with fever, having chills and felt just miserable, as he attested to by his tears. His home was in Ghora Gali, about ten miles from Murree. Probably he had walked to Murree to see if he could earn a few annas.

Our problem was how to get him safely home to his parents. Sr. Kathleen put her umbrella over the boy to shield him from the sun and proceeded to make plans. The road was a busy one and, although no one had stopped until we came along, a little crowd of villagers began to form and ask questions. It was a little hard at first to convince them that the boy was sick and that something should be done. A couple of the men peered under the umbrella and said "utho" (Get up!) but the boy just cried. We took up a collection and gathered together enough for bus fare to Ghora Gali (two rupees), then sent a little village boy up to the mall to get a horse. After a few minutes the horse walla arrived and we explained the situation to him. He gently lifted the boy on to his horse and, not to be outdone in generosity, refused his usual fee for the hire of his horse and gave it to the boy as a little something extra. We could easily have paid for the transaction ourselves —our share was only eight annas —but then we would have lost an opportunity to give an object lesson in Christian charity. Since love as well as light diffuses itself the men were soon willingly adding their share once the initial few annas were contributed. We hope that they went away with a feeling of "See how they love us!" Some of the Sisters saw one of the men a few days later and judging from the tone of his enthusiastic greeting, perhaps we have planted a little seed and it is up to God "to give the increase."

—Sr. M. Karen, R. N.

During this time of expectation, the Sisters meditate on the prophecy of Isaias, preparing themselves for Christmas.

ADVENT

. . . "PREP

ADVENT IS the season of the seed: Christ loved this symbol of the seed. The seed, He said, is the Word of God sown in the human heart.

Advent is the season of the secret, the secret of the growth of Christ, of Divine Love growing in silence.

For nine months Christ grew in His Mother's body. By His own will she

Picking greens for the Advent Wreath which holds a place of honor during the four weeks symbolizing the 4000 years of expectation.

ARE YE, HIS WAYS"

formed Him from herself, from the simplicity of her daily life.

It is the Holy Spirit Who sows this Christ seed in us and the Spirit of Wisdom, Light, Truth is given to us in countless ways. . . through books, through the spoken word, through music and pictures, through almost every possible experience.

The Reed of God
Carol Houselander

Making a wreath is a new experience for many, but the bundle of fragrant greens soon takes on shape as this year's Advent Wreath.

On the fourth Saturday in Advent, all the candles on the wreath are lighted, the "Rorate Caeli," the Advent hymn, is sung for the last time, and knowing that the "Lord is nigh unto all that call upon Him," the novices pray: "Come, Lord Jesus, tarry not!"

. . . now its Christmas in Fox Chase

(Photos — Northeast Breeze)

Preparing the outdoor crib for the carol singing after the Midnight Masses.

The postulants decorate every nook and cranny with greens to celebrate the coming of the Christ Child.

Book Review *

ASIA AND THE DEMOCRATIC REVOLUTION

Mr. Richard L-G Deverall with Mr. Fung Hoi-Choi of the Hong Kong and Kowloon Trade Union Council.

IN AN ERA when missionaries are struggling to make known the vast and urgent needs of the peoples of the East, Mr. Deverall's book comes, a refreshing support in the battle to promulgate this message to the world. As an employee of the Free Trade Union of the American Federation of Labor, Mr. Deverall spent several years in Asia, studying the cultural, political and socio-economic patterns of the people, in order to develop a better understanding between East and West.

In a very enlightening manner, the author points out that because of the history of colonialism and imperialism under which many of these countries have labored, the present breakdown of colonial power in the East is paving the way for a tremendous moral upsurge which if properly guided, will develop into a truly democratic revolution, or, if ignored, into totalitarian dictatorship.

The core of the domestic revolution lies in the concept of the absolute and unconditional equality of men before the Creator. There is no superior race. He reminds us that over half the people of the world are colored, and the white men consequently compose a minority group.

When Mao-Tse Tung took over China in 1949, he said, "China will no longer be humiliated. China has stood up!" It is human dignity which the Asians crave more than anything else at the present—even more than rice. And while the Red leaders have been clever enough to voice the sentiments stirring the soul of the Chinese people we of the West fail to realize the tremendous brink upon which we stand. Unless American aid is wisely invested in well-planned technical assistance programs of self-help, the effect will be that the rich become richer, and the poor, poorer.

Indeed, Asia has stood up! And while we look on, "one-fifth of the entire world has passed behind the iron curtain!"

The basic philosophy of the democratic revolution finds expression in the truly free enterprise system. Cooperatives, trade unions and other vocational organizations are an integral part of this.

As Mr. Deverall says, Asia and Africa are in danger of rejecting the democratic revolution principally because they have never had an opportunity truly to apprehend and comprehend the full character of organic democracy. We need an "authentic shirt-sleeve approach to foreign peoples."

"Today the resurgence of the Christian social reform movement and its core of humility and love for humankind are giving added fire and supernatural brilliance to the aura of the democratic revolution." This is a resurgence of Christian radicalism (a return to the roots, to first principles), for in its proper sense one may say that "Christ on earth was the greatest Radical of all times."

With a realistic approach, Mr. Deverall states that "the axis of world power has moved in our life time from the Atlantic to the Pacific. Because of population figures and the trend of birth rates, he predicts that Asia and Africa are emerging centers of revived and new cultures, and the seat of a new and fertile civilization.

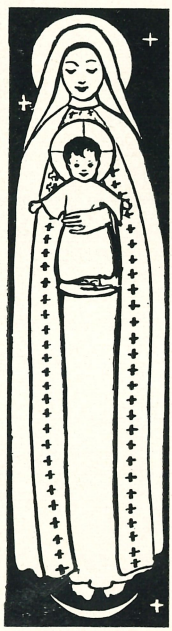
And how imperative it is that we Americans realize that it is the intellectual and spiritual that are primarily in need of attention in India!" The union of the ancient religions of the East with the dynamic moral force of the democratic revolution — such is the grandeur of the pregnant possibility of this generation!"

Throughout, the author makes keen and discerning observations of the East and our relations with them. This book provides fascinating thought to any reader in need of stimulation!

—Sr. M. Clare, R. N.

**International Literature Printing Co., Tokyo, Japan, $2.50*

LET US IN THE MARIAN YEAR INVOKE THE MOST POWERFUL PATRONAGE OF THE VIRGIN MOTHER OF GOD



Hail! channel of good.
Hail! reverser of evil.
Hail! remedy for Adam's sin.
Hail! drier of Eve's tears.
Hail! height beyond men's thought.
Hail! depth beyond the angels.
Hail! kingly throne.
Hail! for who bears all you bear?
Hail! star that bore the Sun.
Hail! shelter of incarnate God.
Hail! you through whom all things are made anew.
Hail! you through whom the Maker of all becomes a little child.
Hail! you through whom the Maker is worshipped.
Hail! Maiden Bride.

Akathistos Hymn

From
Patna
Karachi
Bombay
Poona
Delhi
Rawalpindi
Mandar

PATNA

In my years here at the hospital I have never been so busy as now. For the past two months the daily census has stayed 160. Just to go to the nursery and to see two little newborns one at each end of the crib kicking each other in the face cheerfully . . .

Sr. M. Aquinas has had a line of tetanus babies all down the verandah. The other night the night nurse was tube feeding them one by one and at the same time the mothers were all lined up watching her and listening to a lecture as to why their babies had tetanus.

—Sr. M. Adelaide

KARACHI

On September 16th our 500th baby for the year 1953 was delivered. It has become a custom for us to give the mother a little "gift" . . . just a little frock or shirt for baby and a box of baby powder or something, as a sign of recognition — wrapped in our nicest re-ironed tissue paper with a bit of gay ribbon. It's amazing how they remember and talk of it later. Just recently the one who received it in 1951 reminded me of it!

This year it was Rabia Sultana who happened to be number 500, and she was really surprised, because we don't tell anyone ahead of time as there might be too much disappointment about it. So Rabia received the little package with surprise, all right, and a bit of dubiousness. All day the enticing-looking little packet lay just beside her head on the pillow, unopened. That evening at 4:30 when all the visitors arrived, and her kiddies and husband, too—swish, went her cubicle curtains (for privacy), and not even the company name on the little T-shirt for baby went unread or untouched by each member of the family — each piece taken out and again re-folded and replaced in its cellophane or tissue wrapping. It was delightful to see them!

Most of the people here have a very lovely family and home life, very gratifying to see, and they enjoy coming to "Holy Family," even though they do not quite understand the whole meaning of "Holy Family." They think it has something to do with being one whole happy family together . . . and it has. . . .

—Sr. M. Brigetta, R. N.

BOMBAY

We are just completing our fourth week on night duty—and I do mean *we!* — the mosquitoes, flies, ants (flying and otherwise),

lizards, birds, rats, and me are doing our best to hold the fort! I feel like St. Francis in the midst of them all! Two birds insist on sleeping above the desk and no amount of poking will evict them. They send down sweet nothings periodically to be sure I remember they're there (Hope I don't meet with the fate of Tobias!).

When the insects get so thick I can't see, I attack with the DDT spray. It leaves me gasping at death's door, and the bugs? Harumph! Happily buzzing around, waiting my revival! And I mustn't forget the chaukidar on the night roll call. He's really a big help. Last night *we* caught a thief up stealing cocoanuts, and it took fifteen minutes to resurrect the chaukidar! He's quite a character. Really a detective at heart—goes stealing around the grounds, thumping a stick, dragging his heels, and clearing his throat—it's enough to raise the dead, let alone warn any thieves within a radius of two miles! —Sr. M. Carol

POONA

Now a word to those of you who love poison ivy. Don't feel cheated if you are sent to India. As you probably know, the mango is a good substitute and now I have the pleasure to announce that there is also a second one, namely the cashew nut. The other day, through lack of peanuts we made some cashewnut brittle, after which we developed a nice itchy rash. It is very consoling, however, that science is progressing rapidly and that the doctors of a New York Hospital have found out that the common cause for blotchy, itchy skin disorders is the emotion of resentment. (Reader's Digest: Jan. '52) We are very grateful to know this and we believe it. Was not the eating of the forbidden fruit in Paradise the cause of sin entering into the world? And did we not read in the same Reader's Digest, a few years ago, that lack of sugar increased the criminal tendencies of the inhabitants of a war-torn Europe? Our only difficulty was that we were not conscious of any feeling of resentment. Our fellow Sisters, those priceless helps to self-knowledge, knew the answer right away. We had played a game at recreation the day before and Sr. Xavier had come out first and we only second! So that was that . . . I suppose the next fallacy the Church has to combat will be the assertion that asceticism can be reduced to a simple matter of diet! —Sr. M. Henrietta

DELHI - MUSSOORIE

Hello from the hills of Mussoorie and what a beautiful place it is. It is almost unbelievable that one night you could be turning, tossing and perspiring even under a fan and the next night be comfortable beneath three substantial blankets. Sister Joanna and I started off for Mussoorie last Monday evening after a rather hectic day. We had three or four "calls" to make and then a woman phoned. She was returning to England and wanted to give us a baby bed for the hospital. Like most Medical Missionaries we refuse nothing even though we doubted when and how we could pick up the bed that day. The bed turned out to be a heavy wooden affair big enough for a six-year old. We had infant size in mind. Roped on to the Ford we carried the bed around town and even into the President's estate, past at least ten smiling soldiers who gave us a salute.

During the course of the day we also had an interview with the

M. Richard and Sr. M. Joanna, beggars and
lers, Holy Family Hospital, New Delhi, India.

famous "King Kong." He is an international wrestler and his pictures make him look like some kind of a wild beast. He is the largest man I have ever seen, circus fat men and women included. How we got to meet him is a story. We have a Sikh friend who is a sports enthusiast. He referees the wrestling matches which are being held in Delhi at this time. He had previously told us to go and see the manager of the stadium to see if a charity performance might be given for the hospital. We did so and were told that it was a complicated procedure but the manager promised to take it up with the board of directors, the promoters and the fighters. We settled down for a long wait.

But Captain Singh decided we should talk to the wrestlers and plead our own case. He called us on Sunday and said that King Kong was coming in from Bombay that day and he would try to get a few minutes interview for us. Delhi's dust storms were raging and all planes had been cancelled so King Kong had to stay in Bombay. Captain Singh called us many times on Monday, but finally a time was arranged. We went to the National Sports Club and a friend of ours, Mrs. Riche-Evans whose husband suggested she come with us as he could not feature two "Little Sisters" as he calls us, meeting a wrestler alone! Captain Singh introduced us to King Kong whose name is Emile Sayer. He is a Hungarian. He was very nice to us and has a very kind face. He sat down on a couch and filled it. But he is a gentleman and promised to see what he could do about a benefit performance for Holy Family Hospital. We have great hopes. Captain Singh was even more excited than we were. He was so proud of himself and justly so for arranging things. It seems that King Kong was ready to leave the club immediately after his lunch but Captain Singh ate slowly, three helpings, etc., to stall the famous King of the Ring.

We arrived back at the convent about 5:30 and left for the station at 7. The train was packed, we couldn't find a seat in Inter, nor Second. Finally we went into a reserved second class compartment hoping that those who had reserved it might not turn up. They did, and we had to move our luggage. There was a small compartment at the end of the coach and one man therein. I asked if we could store our luggage in his place. Though the distance is only 150 miles we didn't arrive in Dehra Dun until 7 A.M. From there you take a bus for the wildest ride of your life. Straight up the mountain, terrific curves and the bus drivers passing each other on the wrong side as you go around a hair pin curve. I said my prayers.

Really you felt as if another two inches and the bus would be over the side for a drop of 5,000 feet. The others in the bus didn't seem to mind at all. They chatted unconcernedly, which just shows you the adaptability of man. He can even get used to racing up a mountain side. Once in Mussoorie the foot work begins. It was a question of "friend come up higher." Puffing and panting we finally reached St. Mary's Hospital. It's tucked in amid pine trees and blue clouds with a mountain on either side. It is quiet except when the "pediatrics" department is voicing its complaints. Sister M. Vincent and Sister M. Jude have their hands full, caring for a full house.

Sr. M. Richard

RAWALPINDI

Problems, problems, problems with an unfinished building. Now it is snakes in the basement. The handy man killed a big krait down there the other day. Unless we finish the basement, we have been told that snakes will be making their permanent homes there. Ugh! When I have to go down to the storeroom for anything, I keep my eyes moving from right to left, open the door, get what I want and go back double quick!

—Sr. M. William, R.N.

MANDAR

Here is another true snake story. The second night of the nurses' three-day retreat the Sisters were called over to the back of the Nurses' Home. They told us there was an "unusual" snake in one of the trees. It glowed at night, could only be killed by a gun because it could leap from tree to tree and was deadly poisonous. The South Indian nurses added that some snakes are known to swallow diamonds. . . .

Sr. Barbara flashed her light on the tree but could see nothing as it was a dim light. Simultaneously a glow appeared in the tree—first faint, then brightly, so that one could see smoke. (I wondered if it wasn't the devil himself in that tree!) Then it died away. Father quickly turned his light on it and we all saw what it was. One of the power lines had rubbed against the trunk of the tree so that all the insulation had worn off, exposing the inner wires, which periodically blazed up. The electrician fixed them within half an hour thus putting an end to our diamond-eating snake. —Sr. M. Evelyn, M.T.

YOUR WILL . . . .

can help the Medical Mission Sisters bring health and healing to the sick and suffering of mission lands. The following approved form of bequest may be used:

"I hereby give (devise) and bequeath to the Society of Catholic Medical Missionaries (also known as the Medical Mission Sisters), an institution incorporated under the laws of the State of Maryland, and its successors forever the sum of $..... for its general purposes."

If you have already made your will, it is not necessary to make a new one. It is sufficient that a codicil be added, using the above form.

R. I. P.

Mr. Clarence Baker, Brooklyn, N. Y.
(Father of Sr. M. Raymond, S. C. M. M.)
Rev. Lawrence G. Becker, Hinton, Va.
Rev. Michael F. Cronin, St. Louis, Mo.
Rev. Joseph J. Keenan, Milton, Mass.
Rev. Joseph L. Stephan, Batavia, N. Y.
Rt. Rev. Msgr. Wm. Zierolf, Sandusky, Ohio
Mr. Julius G. Aceves, New York, N. Y.
Mr. J. Coffey, Congers, N. Y.
Thomas K. Galvin, M. D., Baltimore, Md.
Mr. George Harnischfeger, Richmond Hill, N.Y.
Mrs. Agnes Hession, Dorchester, Mass.
Miss Rose Kane, Iuka, Ill.

FIRST AID

FOR YOUR MEDICAL MISSION PROGRAM

RECORDINGS

Stories of Sister-Doctors and Nurses in India, Africa, Indonesia. 8 unbreakable 12" records, playing time 9 minutes.

For rental:
$.50 plus postage
For sale:
$2.00 a record.
$7.00 an album of 4 records

FILM STRIP

Sister Alice in Missionland 60 frame black and white film strip of Medical Mission Sisters at work in the missions.
Rental is free . . . postage only.

MOVIES

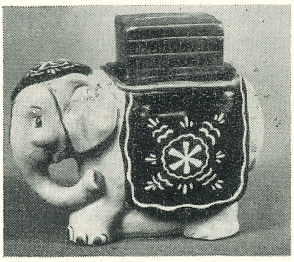
"Where Women Conquer" Black and white 16mm. film depicting how Sisters armed with medical science are spreading the Kingdom of God. Running time: 30 minutes.

"Hands of Mercy" New color 16mm. film of Sisters at Holy Family Hospital, Patna, India.

Running time: 20 minutes.

PHOTOGRAPHS

Black and white prints of peoples and places in India and Pakistan, available for your Bulletin Board.



"RAJA"

What You Need Is An Elephant!

For your: OFFICE
LIVING ROOM
CLASS ROOM

Your Friends will help you feed him
for Medical Missions

MEDICAL MISSION SISTERS PHILADELPHIA 11, PA.

Please send me a RAJA ELEPHANT BANK to fill for our Missions

We MAIL HIM FREE YOU FILL HIM FULL

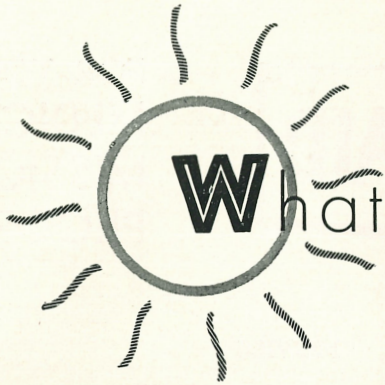
I am also interested in receiving:

— Where Women Conquer
— Hands of Mercy
— Mission Recordings
— Sr. Alice in Missionland

Name .....

Address .....

City ..... State .....



What's New in the Medical Mission World

Sr. M. Daniel, S. C. M. M.

"DON'T SEND ME TO BED!"

When a Burmese villager is ill, it is he who immediately sends for a physician, for drugs, for treatment. When a Greek is ill, he does not exhibit any need for care. He will not go to bed unless he is incapable of standing up, thus exercising fortitude. It is cruel to tell a Greek that he must stay in bed and do nothing for himself; it is much kinder to say it to his wife or other relatives so that the sick man will not be put into the position of asking for this pampering.

The Western practice of going to bed when ill is not present everywhere. In some societies, such as that of the Zuni Indians in New Mexico, one goes to bed only when one is ready to die. Sending such people to bed may be disturbing!

(WHO Newsletter, October, 1953)

* * *

Since July 2, 1953, a 50-bed Tropical Disease Branch has been admitting patients and accepting students at the Würzburg (Germany) Medical Mission Institute.

FIDES SERVICE, August 15, 1953

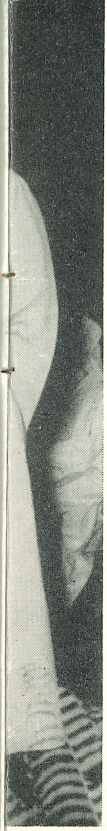
PACK YOUR BLACK BAG

The Gold Coast has a total of 156 physicians for a population of 4 ¾ millions. Of this total. 111 are in Government service. They see patients only in policlinics and hospitals. Because of the long lines of patients waiting to see them, many people frequent the country's 45 independent practitioners. However, the people change physicians more readily than we would grocers, for this reason.

Medical practice on the Gold Coast is greatly influenced by the bad roads, the lack of proper nursing care in the mud huts and great distances between villages. Many independent practitioners hold their hours of consultation wherever a busy market day is in session. Obviously, because of the lack of a laboratory, the diagnosis is not always very accurate. However, much good is accomplished.

Smallpox occurs frequently in spite of a good system of innoculation. Whole villages are sometimes wiped out by sleeping sickness. Dr. Morris, an expert in this field, seems to be making it his lifework to exterminate the tsetse fly in the Gold Coast. In some villages in the north, more than 10% of the population is totally blind. This is caused by the black fly whose breeding place is hard to reach.

(J. A. Beukering, M.D. of Accra from "Nederlandsch Tijschrift voor Geneeskund" Nov., 1952)



Sr. Marianne, R. N. (Detroit, Mich.) with Granny and Little Eggnog, Holy Family Hospital, Berekum, Africa.

LITTLE EGGNOG

Sr. M. Raphael, B. S. Pharm.

CHANGING the typewriter ribbon would ordinarily mean throwing the old ribbon and spool into the waste basket. Not so in Holy Family Hospital, Africa. The half-red ribbon and shiny spool will make a "car" for Little Eggnog.

The second day that little Yaw Boakye came in for his daily feed he was given a thin soup of cooked oatmeal with a raw egg and powdered milk beat into it. He loved it. Henceforth—Little Eggnog.

When granny brought him to us she said he was sick: had been so ever since his mother died when he was a four-months-old baby. Sister looked at the little wizened-up child (almost two-years-old, and unable to stand alone) and saw the sad and oft repeated story of an orphan baby being raised on a diet of carbohydrates, with no milk and no protein.

The African families love these babies and do their best to raise them. But usually they die within the first year or two. It is not due to neglect, but from ignorance of diet and hygiene on the part of the family. No dairy cattle are kept in this land of the tsetse fly—carrier of sleeping sickness. Occasionally some of the educated members of the family know about buying tinned or powdered milk. But even then it is expensive.

We had one family come to us with a three-weeks-old baby. The mother died, and they were trying to feed it with a "formula." They bought the powdered milk, and made up the feed: one teaspoon to about eight ounces of water. Aside from the feed being completely inadequate, the water was unboiled, and they knew nothing about sterilizing the bottle, etc.

Granny had done her best for little Yaw. Every day she gave

him *koko*, a corn gruel made of mildly fermented mash. Whenever he cried she gave him a piece of boiled yam, and sometimes a little bit of soup from the family pot when the family had their evening meal, the women and young girls and small children eating whatever the men and older boys had left. But on this diet of almost all carbohydrate he was not growing and "was sick." She finally gave it up as a losing job and after repeated urgings from a neighbor who had been to Holy Family Hospital, she took YAW to the sisters.

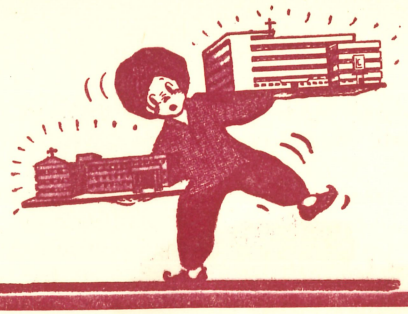
No, she would not leave him in hospital, but she would stay in a nearby village and come in every day for medicine. We settled on that. It took only one day for the little boy to get used to his new diet. We built it up gradually, starting off with the eggnog.

After his morning feed, granny ties him on her back once more and goes home carrying with her a piece of bread with a thick layer of margarine, some protein powder to be sprinkled on his afternoon *koko,* some multi-vitamins, and sound advice on what he is to get during the day: a mashed banana, oranges, peanut soup and some meat out of the evening pot. This last item is the most difficult for them to supply as meat is expensive and scarce. But we try to educate the mothers (and grannies) to use the foods that are available to them. They have an abundance of fruit, and wonderful food value in their palm nut and peanut soups.

In just a few days Little Eggnog's cheeks filled out, and he looked better. We know that granny attributes it more to the medicine than to the food, but she is intelligent and cooperative.

One thing we are sure of, the old grandmother will try. If she goes back to giving him nothing but carbohydrates it will be because of the difficulty of preparing special foods when she must busy herself all day long with going to farm to get food and firewood, carrying water from the stream, pounding the fufu for the family meal. It will be because all the other women in the compound tell her the child has a "bad spirit" and is doomed to die. It will be reverting to the old, ingrained belief that sickness is caused by spirits, rather than natural causes. But after all, granny had only three weeks of education in dietetics.

But let me tell you about taking Little Eggnog's picture . . . first we got him set up in the dispensary for a flash bulb picture. The best action Little Eggnog can do is to eat—so we gave him a piece of bread and jam. (Actually it was a cold pancake left from breakfast—he loved it.) The little fellow behaved beautifully, smiled coyly, rolled his big eyes, and licked the jam off the pancake. We had Granny all nerved for the flash—but it was a "dud." Was the bulb no good, or didn't I work it right? No time to experiment; it was late afternoon; Sr. Marianne was needed back in the ward; I had to get saline ready for autoclaving! We moved the set-up outside to the verandah, and by this time Little Eggnog was tired and wanted to go home. He cried and fussed and the more we tried to make him smile the worse it got—and the sun sank lower. Finally I got a shot in-between snivels, as he fingered the bedraggled pancake. Time involved 2:45 to 5:20 P.M. Result: one picture!



Which Hospital Needs Your Help?

Rawalpindi, Pakistan

By December there will be 90 student nurses at Holy Family Hospital in Rawalpindi. No wonder Sr. M. Dolores (St. Louis, Mo.) is asking for 90 fountain pens at $1.00 each.

Pindi's Christmas list includes:

24 combination locks . ea. $ 1.20
6 surgical scissors . . ea.$ 6.50
1 wheel chair—old or new.
1 stethoscope . . . . . $ 3.00
1 blood pressure set . . . $29.50
1 sewing machine—old or new

Dacca, Pakistan

How to make a bed without sheets is the dilemma faced by Sr. M. Benedict, M.D., (Phila., Pa.) The workmen are putting the finishing touches on the new hospital in Dacca and Sister is desperate for 200 sheets (1. ea.), towels ($.50), and pillow-cases ($.50 ea.)

Karachi, Pakistan

With only half the new hospital built, Sr. M. Martin, R.N. (Carroll, Ia.) writes from Karachi that the old hospital is so overcrowded that she is determined to move into the new one. She needs 25 Fowler beds immediately. Each costs $60. The mattresses cost $25. each.

She also needs:

50 small food trays . . . . $1. ea.
50 large trays . . . . . $2. ea.
1 censer and boat . . . . . $20.
1 Dressing sterilizer . . . . . $1800.
2 Water sterilizers . .$1000. ea.

Delhi, India

Delhi needs everything! But mostly dollars to pay the workmen.

DEAR SISTERS:

Here is $ ..... for your mission hospitals.

For ( ) Sr. M. Dolores ( ) Sr. M. Martin
( ) Sr. M. Benedict ( ) Sr. M. Joanna

Name .....

Address .....

City ..... State .....

MEDICAL MISSION SISTERS

8400 Pine Road **Fox Chase, Phila. 11, Pa.**

Mrs. Edward Froehlich
339 Southwont Blvd. 1C-56
Johnstown, Pa.

Our Mission Hospitals are dedicated to the Holy Family

May the Blessings and Peace of the Holy Family be yours today and always.

THE HOLY FAMILY by Walter Mellmann. This and other original hand printed designs by Mr. Mellmann may be obtained through the American St. Boniface Society, N. Y.